

Position Statement on Person-Centered Thinking, Planning, and Doing

Position Statement

The position of The Arc Minnesota is that all services and supports for persons with intellectual and developmental disabilities (I/DD) must:

- Be developed, planned and put into action based on the principles of Person-Centered Thinking and Planning.
- Meet state and federal mandates found in the Centers for Medicare and Medicaid Services (CMS) Home and Community Based Services regulations and the Minnesota Olmstead Plan. Both call for Person-Centered Plans for long-term services and supports that help people to live, work, and participate in their preferred communities as they choose.
- Include appropriate training for people with (I/DD), families, and others in their circle of supports about person-centered planning, thinking, and doing.
- Ensure that a statewide structural framework of responsibility exists to review Person-Centered Plans, actions taken, and progress made toward measurable goals. We suggest this responsibility could be given to the Minnesota State Quality Council. The review could be based on objective, standardized best practices created by respected third parties.
- Provide for monitoring of the ongoing implementation of Person-Centered Plans. This must be an integral part of any analysis of the quality of life of individuals with intellectual and developmental disabilities.

Issue

Person-Centered Planning and, more recently, Person-Centered Thinking have been around for many years. They were developed as an organized process of discovery and action meant to improve the quality of life for persons with intellectual and developmental disabilities.

Person-Centered Plans are based on these principles:

- The focus of services and supports in long-term care is to assist persons in gaining control over their own lives.
- The plan is developed by an independent group made up of family members, friends, providers, and other interested parties with multiple perspectives, but the primary direction must come from the individual. Ideally, trained facilitators should assist in plan development.

- The plan recognizes the validity of individual desires, interests, and dreams.
- The individual sets the agenda and the individual's aspirations are equated with his/her needs.
- The plan focuses on individual capacity and assets rather than on limitations.
- The plan encourages the development of personal relationships and creates opportunities for participation in the community. The process must provide information for informed choices.
- The process makes what is important "to" the person as important as what is important "for" the person. The process is person-driven and person-controlled and not limited to what currently exists within the system.
- Person-Centered Service Plans must have measurable goals and outcomes that must be acted upon to increase the individual's quality of life and work toward life goals. Plans must designate who will take actions and must provide for periodic progress reviews and reevaluations.

In the past, the assumption that developing a Person-Centered Plan would automatically lead to actions towards the stated goals did not prove true. More is needed to move individuals and systems to change services and supports, funding, and relationships in order to promote necessary actions to actually achieve the goals and dreams embodied in Person-Centered Plans.

It has only been recently that federal and state policies have mandated Person-Centered Plans for the delivery of long-term services and supports. CMS's Home and Community Based Settings regulations covering waived services require the use of Person-Centered Plans. In Minnesota, the Olmstead Plan states that Person-Centered planning is foundational to overcoming system biases and supporting people's ability to engage fully in their communities and must be adopted.

Steps for the implementation of the Person-Centered Plan must be included in the plan, along with the designation of individuals who will be responsible for taking actions toward stated goals. The planning group must meet periodically to review progress and make any necessary changes. The dates of these meetings should be stated in the plan.

These transformational changes will not be fully achieved without a statewide structural framework of responsibility for the ongoing analysis of the actions taken and progress made in the implementation of Person-Centered Plans. Annual reevaluation must ensure that workable plans with measurable goals are created and that the required actions are being taken in their implementation.

Approved by The Arc Minnesota Position Statements Task Force - August 17, 2015.

Approved by The Arc Minnesota Public Policy Committee - August 19, 2015.

Approved by The Arc Minnesota Board of Directors - September 12, 2015.

Approved by Delegates at The Arc Minnesota Annual Meeting - October 23, 2015.